



City of West Des Moines

2nd Quarter Reporting Worksheet

Please complete and return this form to the City of West Des Moines by **July 31st**

****Failure to complete and return this worksheet may result in a fine and/or the suspension of your security and/or fire alarm monitoring/installation license.

Company Name: _____

Address: _____

Contact Person: _____

Phone & E-mail: _____

Part 1 - MONITORING:

Alarm monitoring companies are responsible for collecting and submitting fees on a quarterly basis based on the number of individual alarms monitored.

Number of all **commercial** accounts monitored in Quarter 2: _____

Total Commercial Fees Due for Quarter 2: $\begin{array}{r} \times \quad 6.00 \text{ each} \\ = \$ \end{array}$ _____

Number of all **residential** accounts monitored in Quarter 2: _____

Total Residential Fees Due for Quarter 2: $\begin{array}{r} \times \quad 3.00 \text{ each} \\ = \$ \end{array}$ _____

Grand Total Fees Due (Commercial + Residential): = \$ _____

Make check payable to: City of West Des Moines

*****It is required that you attach a list of alarm information including owner names and alarm addresses (Indicate which, if any, new accounts are for Quarter 2)*

and/or

Part 2 - INSTALLATION:

No monthly fees are due for installation. However, you are required to report information for the locations in West Des Moines you have installed alarms in the previous quarter to ensure all alarms are registered with the City (It is the responsibility of the installer to provide the owner of the alarm with the City of West Des Moines Alarm Registration Form, which is available at www.wdm.iowa.gov).

Number of all **systems installed** in Quarter 2: _____

Number of all **systems disconnected** in Quarter 2: _____

*****It is required that you attach a list of alarm information including owner names and alarm addresses (Indicate which are Quarter 2 installs and which are Quarter 2 disconnects)*

Return this form and any applicable payments and requested **lists** to:

City of West Des Moines
Kristi Garland – A/R
4200 Mills Civic Parkway
P.O. Box 65320 (mailing address)
West Des Moines, IA 50265

If you have any questions, please contact me at (515) 222-3609 or kristi.garland@wdm.iowa.gov.